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PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

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<b>TRANSMITTAL FORM</b> <i>(to be used for all correspondence after initial filing)</i>		Application Number	10/005,315
		Filing Date	12/07/2001
		First Named Inventor	Chikao NAGASAKA
		Group Art Unit	
		Examiner Name	
Total Number of Pages in This Submission		Attorney Docket Number	740165-320

**ENCLOSURES (check all that apply)**

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input checked="" type="checkbox"/> Response to Missing Parts/ Incomplete Application <input checked="" type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input checked="" type="checkbox"/> Assignment Papers <i>(for an Application)</i> <input type="checkbox"/> Drawing(s) <input checked="" type="checkbox"/> Declaration and Power of Attorney <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input checked="" type="checkbox"/> Other: English translation of patent application; 19 sheets Formal Drawings; Transmittal of Priority Document/JP 2000-374588
Remarks		<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees required or credit any overpayments to Deposit Account No. 19-2380 for the above identified docket number.

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm or Individual name	Thomas W. Cole Nixon Peabody LLP 8180 Greensboro Drive Suite 800 McLean, VA 22102
Signature	
Date	April 8, 2002

**CERTIFICATE OF MAILING**

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date:

Type or printed name	Adele M. Stamper
Signature	
Date April 9, 2002	

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Washington, DC 20231.

# FEE TRANSMITTAL FOR FY 2002

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$910.00)

Complete if Known	
Application Number	10/005,315
Filing Date	12/07/2001
First Named Inventor	Chikao NAGASAKA
Examiner Name	
Group Art Unit	
Attorney Docket No.	740165-320

*O I P E S*  
*APR 15 2002*  
*MAILED TRADEMARK NOTICE*

## METHOD OF PAYMENT

1.  The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number

19-2380(740165-320)

Deposit Account Name

Nixon Peabody LLP

Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

Applicant claims small entity status. See 37 CFR 1.27

2.  Payment Enclosed:

Check     Credit Card     Money Order     Other

## FEE CALCULATION

## 1. BASIC FILING FEE

Large Entity Fee Code	Fee (\$)	Small Entity Fee Code	Fee (\$)	Fee Description	Fee Paid
101	740	201	370	Utility filing fee	740
106	330	206	165	Design filing fee	
107	510	207	255	Plant filing fee	
108	740	208	370	Reissue filing fee	
114	160	214	80	Provisional filing fee	

SUBTOTAL (1) (\$740)

## 2. EXTRA CLAIM FEES

Total Claims	Extra Claims	Fee from below	Fee Paid
	-20**	=	
Independent Claims		X	
Multiple Dependent		=	

Large Entity Fee Code	Fee (\$)	Small Entity Fee Code	Fee (\$)	Fee Description
103	18	203	9	Claims in excess of 20
102	84	202	42	Independent claims in excess of 3
104	280	204	140	Multiple dependent claim, if not paid
109	84	209	42	** Reissue independent claims over original patent
110	18	210	9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$)

\*\*or number previously paid, if greater; For Reissues, see above

## 3. ADDITIONAL FEES

Fee Code	Large Entity Fee (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
105	130	205	65 Surcharge – late filing fee or oath	130
127	50	227	25 Surcharge – late provisional filing fee or cover sheet	
139	130	139	130 Non-English transaction	
147	2,520	147	2,520 For filing a request for <i>ex parte</i> reexamination	
112	920*	112	920* Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840* Requesting publication of SIR after Examiner action	
115	110	215	55 Extension for reply within first month	
116	400	216	200 Extension for reply within second month	
117	920	217	460 Extension for reply within third month	
118	1,440	218	720 Extension for reply within fourth month	
128	1,960	228	980 Extension for reply within fifth month	
119	320	219	160 Notice of Appeal	
120	320	220	160 Filing a brief in support of an appeal	
121	280	221	140 Request for oral hearing	
138	1,510	138	1,510 Petition to institute a public use proceeding	
140	110	240	55 Petition to revive – unavoidable	
141	1,280	241	640 Petition to revive – unintentional	
142	1,280	242	640 Utility issue fee (or reissue)	
143	460	243	230 Design issue fee	
144	620	244	310 Plant issue fee	
122	130	122	130 Petitions to the Commissioner	
123	50	123	50 Processing fee under 37 CR 1.17(q)	
126	180	126	180 Submission of Information Disclosure Stmt	40
581	40	581	40 Recording each patent assignment per property (times number of properties)	
146	740	246	370 Filing a submission after final rejection (37 CFR § 1.129(a))	
149	740	249	370 For each additional invention to be examined (37 CFR § 1.29(b))	
179	740	279	370 Request for Continued Examination (RCE)	
169	900	169	900 Request for expedited examination of a design application	
Other fee (specify) _____				

\* Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$170)

## CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to Commissioner for Patents, Washington, DC 20231, on April 9, 2002.

Name: Adele M. Stamper

## SUBMITTED BY

Complete (if applicable)

Name (Print/Type)	Thomas W. Cole	Registration No. (Attorney/Agent)	28,290	Telephone	703 790 9110
Signature	Thomas Cole			Date	April 8, 2002



Docket No. 740165-320

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of: )  
Chikao NAGASAKA ) Group Art Unit:  
Serial No. 10/005,315 ) Examiner:  
Filed: 12/07/2001 )  
For: DEVICE CONTROLLER )

CERTIFICATE OF MAILING

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Adele M. Stampfer  
Adele M. Stampfer

**RESPONSE TO NOTICE TO FILE MISSING PARTS  
OF NONPROVISIONAL APPLICATION**

Commissioner for Patents  
Washington, D.C. 20231

Sir:

In response to the Notice to File Missing Parts of Nonprovisional Application dated March 14, 2002, submitted herewith are the following documents for filing in the above-referenced application:

1. 36 pages comprising specification, claims, and abstract (and Declaration)
2. 19 sheets of Formal Drawings (Figures 1-17B)
3. Declaration & Power of Attorney
4. Copy of Notice to File Missing Parts of Nonprovisional Application
5. Assignment
6. Transmittal of Priority Document (JP-2000-374588 filed 12/08/2000)

04/17/2002 AOSMAN1 00000031 10005315

01 FC:101 740.00 DP  
02 FC:105 130.00 DP

06/03/2002 55RAZ2J190000009 192380 10005315

01 FC:139 130.00 CH

7. A. Statutory Basic Filing Fee and Surcharge, calculated as follows:

For:	No. Filed		No. Extra	Rate Sml/Lg. Entity	Fee
Basic Fee				\$370/740	\$740.00
Total Claims	6	-20	0	x \$9/18	
Independent Claims	2	-3	0	x \$42/84	
First presentation of multiple dependent claims				\$135/270	
Surcharge				\$65/130	\$130.00
Assignment Recordation					\$ 40.00
TOTAL					\$910.00

A check in the amount of \$910.00 is attached to cover the basic filing fee and surcharge.

All formal requirements now having been met, it is requested that the Official Filing Receipt be issued.

The Commissioner is hereby authorized to charge fees under 37 CFR 1.16 and 1.17 (except the Issue Fee) which may be required now or hereafter, or credit any overpayment, to Deposit Account No. 19-2380(740165-320). A duplicate of this sheet is attached.

Respectfully submitted,

Thomas W. Cole  
Thomas W. Cole  
Registration No. 28,290

NIXON PEABODY LLP  
8180 Greensboro Drive, Suite 800  
McLean, VA 22102  
(703) 770-9300